

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.M.		05-10-01
O.I.P.E. CLASSIFIER		19	53/01
FORMALITY REVIEW	H.S.	866	07-06-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	9-23-02
2	2-10-03
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If more than 150 claims or 10 actions
 staple additional sheet

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